Please type a plus sign (+) inside this box

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.			M4065.0472/P472					
First Inventor Ant			thony Moschopoulos					
Title	INTERNAL DATA TRANSFER							
Expre	ss Mail La	bel No	о.					

(Oni	ly tor new non	provisional	applications und	der 37 CFR 1.53(_{D))} Expre	ss Ma	il Label No.	1				
	APPLICATION ELEMENTS						ADDRES.	s TO:	Commission		0.7	
See MPEP chapter 600 concerning utility patent application contents. 1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) Applicant claims small entity status See 37 CFR 1 27. 3. X Specification [Total Pages 29] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 14]							ADDRESS TO: Commissioner for Patents Washington, DC 20231 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8 Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b Specification Sequence Listing on: i CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of Attorney 11. English Translation Document (if applicable)					
6. [18.	5. Oath or Declaration a. Newly executed (original or copy) b Copy from a prior application (37 CFR 1 63(d)) (ifor continuation/divisional with Box 18 completed) i DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1 33(b). 12. Information Disclosure Statement (IDS)/PTO-1449 Citations Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:											
				19.	CORRESP	ONDE	NCE ADDRE	SS				
X Customer Number or Bar Code Label 24998 Or Correspondence address below							ress below					
Nai	Thomas J. D'Amico Dickstein Shapiro Morin & Oshinsky LLP											
Add	dress		L Street,	NW 		-1						
City	City Washington State		DC		1	Zip Code 20037						
Co	untry	U.S.			Telephone	20	2-828-2232	<u> </u>	Fax	202-887-0689	9	
T	Name (Print	/Type)	Thomas	J. D'Amico	1		Registration N	lo. (Attorne	ey/Agent)	28,371		
	Signature	··· /.		te		\$			Date	August 30, 2	001	

(202) 828-2232

August 30, 2001

Telephone

Date

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Complete if Known

Application Number Not Yet Assigned

Filing Date August 30, 2001

First Named Inventor Anthony Moschopoulos

Examiner Name Not Yet Assigned

Group Art Unit N/A

Attorney Docket No. M4065.0472/P472

_	Group Art Unit					IN/A		
TOTAL AMOUNT OF PAYMENT	(\$) 1,662.00	Attorney Docket No. M4065.0472/P472						
METHOD OF PAYMEN	FEE CALCULATION (continued)							
1. X The Commissioner is hereby authori	3. ADDITIONAL FEES							
indicated fees and credit any overpa	Larg	Large Entity Small Entity						
Deposit Account 04-1073			Fee (\$)	Fee Code	Fee (\$)		Fee Description	Fee Paid
Number		Code	• • •	205	65	Curaha	rge – late filing fee or oath	
Deposit Account		105	130	205	25		rge – late filling fee of batti rge – late provisional filling fee or	
Name	blicant claims small	127	50	221	25	cover s		
Fee Required Underenti	139	130	139	130		nglish specification		
37 CFR 1 16 and 1 17 37 (CFR 1 27	147	2,520	147	2,520		g a request for ex parte reexamination	
2. X Payment Enclosed		112	920*	112	920*	Examir	sting publication of SIR prior to ner action	
X Check Credit Card Money	Order Other	113	1,840*	113	1,840*		sting publication of SIR after ner action	
FEE CALCULATION		115	110	215	55	Extens	ion for reply within first month	
1. BASIC FILING FEE		116	390	216	195	Extens	ion for reply within second month	
Large Entity Small Entity		117	890	217	445	Extens	ion for reply within third month	
Fee Fee Fee Fee Descri Code (\$) Code (\$)	ption Fee Paid	118	1,390	218	695	Extens	ion for reply within fourth month	
101 710 201 355 Utility filing fee		128	1,890	228	945	Extens	ion for reply within fifth month	
106 320 206 160 Design filing fo	ee	119	310	219	155	Notice	of Appeal	
107 490 207 245 Plant filing fee	,	120	310	220	155	Filing a	a brief in support of an appeal	
108 710 208 355 Reissue filing	fee	121	270	221	135	Reque	st for oral hearing	
114 150 214 75 Provisional fili	ing fee	138	1,510	138	1,510	Petition	n to institute a public use proceeding	
(4) E	710.00	140	110	240	55	Petitio	n to revive – unavoidable	
SUBTOTAL (1)	141	1,240	241	620	Petition	n to revive – unintentional		
2. EXTRA CLAIM FEES Extra Fee f		142	1,240	242	620	Utility i	ssue fee (or reissue)	
Total Claims 64 -20** = 44 X 18.0	00 = 792.00	143	440	243	220	Design	issue fee	
Independent 5 -3** = 2 x 80 0	00 = 160.00	144	600	244	300	Plant is	ssue fee	
Multiple Dependent	=	122	130	122	130	Petitio	ns to the Commissioner	
		123	50	123	50	Proces	ssing fee under 37 CFR 1.17(q)	
Large Entity Small Entity		126	180	126	180	Submi	ssion of Information Disclosure Stmt	
Fee Fee Fee Fee Fee Des	scription	581	40	581	40		ding each patent assignment per ty (times number of properties)	
103 18 203 9 Claims in excess of		146	710	246	355		a submission after final rejection FR 1.129(a))	
102 80 202 40 Independent claim 104 270 204 135 Multiple dependen		149	710	249	355		ich additional invention to be ned (37CFR 1.129(b))	
109 80 209 40 ** Reissue indeper		179	710	279	355		est for Continued Examination (RCE)	
over original par		169	900	169	900		est for expedited examination esign application	
110 18 210 9 ** Reissue claims and over origina		Othe	er fee (spe	ecify)		J. 4 40		
SUBTOTAL (2) (\$)	952.00	*Red	luced by i	 Basıc Fılı	ng Fee P	aid	SUBTOTAL (3) (\$)	
**or number previously paid, if greater; For Re	eissues, see above	<u> </u>						
SUBMITTED BY Complete (if applicable)								

Registration No. (Attorney/Agent)

28,371

Name (print/type)

Signature

Thomas J. D'Amico